

**STATE OF MONTANA
DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES
CHILD SUPPORT ENFORCEMENT DIVISION**

RECEIVING YOUR CHILD SUPPORT THROUGH DIRECT DEPOSIT

Direct deposit is the electronic transfer of funds from one bank to another. You may authorize the Child Support Enforcement Division (CSED) to deposit payments directly to your bank account by completing and returning this form with your application.

The first payment the CSED receives after processing your request for direct deposit is used as a test transaction to be sure everything works properly. You will receive a check for that payment. Subsequent payments will be credited to your account.

To cancel direct deposit or change bank information, fax your request to 406-444-6934 or mail it to:

Child Support Enforcement Division
EFT Disbursements / Fiscal Unit
PO Box 202943
Helena MT 59620

DIRECT DEPOSIT AUTHORIZATION FORM

Name: _____ SSN: _____
Last First M

I authorize the CSED to make deposits to the ☐ checking account ☐ savings account listed here. I will promptly repay any amount that is overpaid to this account.

I will notify the CSED in writing if I want to cancel direct deposit or change my bank information.

Signature

Date

**Attach a voided check blank for a checking account
or a deposit ticket for a savings account.**

**The CSED needs your account number and your bank's
routing number in order to establish direct deposit.**